

**PRODUCTION BASE AND POOL QUOTA TRANSFER APPLICATION**  
(Please print or type)

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SELLER'S NAME: \_\_\_\_\_ CERTIFICATE NO. \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

BUYER'S NAME: \_\_\_\_\_ CERTIFICATE NO. \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

EFFECTIVE DATE OF TRANSFER: \_\_\_\_\_

INDIVIDUAL TO CONTACT IF ANY QUESTIONS ON APPLICATION:

NAME \_\_\_\_\_ TELEPHONE NO. ( ) \_\_\_\_\_

COMPLETE THE FOLLOWING ONLY IF NOTIFICATION OF TRANSFER APPROVAL SHOULD BE MAILED TO A THIRD PARTY, SUCH AS A BROKER OR ESCROW AGENT:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

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**ALL TRANSFERS OF PRODUCTION BASE AND POOL QUOTA ARE SUBJECT TO  
THE PROVISIONS CONTAINED IN ARTICLE 5 OF THE MILK POOLING PLAN**

Section 503 of the Milk Pooling Plan provides for public disclosure of all transfers of production base and pool quota.

Applications must be received by the department **on or before the 15th of the month** prior to the effective date of transfer. The effective date is always the first of each month. Applications should be typed or printed legibly and submitted in duplicate.

The terms and conditions of the transfer must be fully disclosed and each item in the application must be completed.

If additional space is needed for any answer, use a separate sheet, cite the applicable item number, and attach it to this application.

Section I is to be completed by the producer(s) buying or acquiring production base and pool quota. All individuals acquiring an ownership interest must be listed in Item No. 9 and must sign the certification in Item No. 12.

Section II is to be completed by the producer(s) selling or transferring production base and pool quota. All individuals having an ownership interest in the business being transferred must sign the certification in Item No. 23.

After an application has been submitted to the Department, it may be revoked by either the transferee or transferor or his authorized agent, provided that the revocation is submitted in writing prior to the effective date of such transfer.

**RETURN COMPLETED TRANSFER APPLICATION TO:**

DEPARTMENT OF FOOD AND AGRICULTURE  
MILK POOLING BRANCH  
1220 N STREET, ROOM A-230  
SACRAMENTO, CA 95814

**SECTION I**  
**TO BE COMPLETED BY PRODUCER(S) ACQUIRING PRODUCTION BASE AND POOL QUOTA**

1. This transfer is requested to be effective on the 1st of \_\_\_\_\_, \_\_\_\_\_.
2. Effective with the date of this transfer, your dairy herd location will be: \_\_\_\_\_.
3. Does the above business presently operate with a production base and pool quota? ☐ Yes ☐ No  
 If yes, give Certificate No.: \_\_\_\_\_
4. Mailing address: \_\_\_\_\_
5. Telephone Number: (\_\_\_\_\_) \_\_\_\_\_
6. Name of Cooperative, if you are a member: \_\_\_\_\_
7. Type of Operation: (Check One)  
☐ Individual ☐ Partnership ☐ Corporation ☐ Other \_\_\_\_\_
8. Corporate or DBA name (Trade Name), if any: \_\_\_\_\_
9. List below the individual and spouse of the proprietorship acquiring an ownership interest in the dairy business covered by this application. If a partnership, list all partners and spouses, if a corporation, list all stockholders. Enter percentage of ownership that each partner or stockholder will have after this transaction.  
  

Transferee _____	Spouse _____	%
Transferee _____	Spouse _____	%
Transferee _____	Spouse _____	%
Transferee _____	Spouse _____	%
10. Does any individual named in Item 9 have an ownership interest in another market milk dairy operating with a production base and pool quota certificate? ☐ Yes ☐ No If yes, complete the following:  
  
 Name: \_\_\_\_\_ Certificate No. \_\_\_\_\_  
 Ranch Address: \_\_\_\_\_
11. Has any individual named in Item 9 sold production base and pool quota during the previous 24-month period?  
☐ Yes ☐ No If yes, complete the following:  
 Name of Seller: \_\_\_\_\_ Certificate No. \_\_\_\_\_
12. It is certified that the information contained in this application is true and correct and that the terms and conditions of this transfer have been fully disclosed and that all individuals acquiring an ownership interest in this dairy production business have signed this application. It is further certified that the milk produced and shipped by the undersigned will be covered by a market milk permit effective with the date of this transfer.

**SIGNATURE(S) OF ALL INDIVIDUALS ACQUIRING PRODUCTION BASE AND POOL QUOTA:**

(Must be signed by buyer and spouse if proprietorship, by all partnership members and spouses if a partnership; by a corporation officer if a corporation.)

Transferee _____	Spouse _____
Transferee _____	Spouse _____
Transferee _____	Spouse _____
Transferee _____	Spouse _____

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Corporation Officer \_\_\_\_\_  
 Title \_\_\_\_\_

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**SECTION II**  
**TO BE COMPLETED BY PRODUCER(S) TRANSFERRING PRODUCTION BASE AND POOL QUOTA**

13. This transaction represents \_\_\_\_\_% of the transferable production base and pool quota allocation registered under Certificate No. \_\_\_\_\_ (Express percentage to six decimal places.)
14. In terms of pool quota fat, the above percentage represents \_\_\_\_\_ pounds. (Express pounds to the nearest hundredth.)
15. Is this a transfer to a member of your immediate family? ☐ Yes ☐ No If yes, give relationship \_\_\_\_\_

16. VALUE OF TRANSFER:

Real Estate \_\_\_\_\_ \$ \_\_\_\_\_  
 (No. of Acres) \_\_\_\_\_  
 Equipment \_\_\_\_\_ \$ \_\_\_\_\_  
 Number of Milking Cows \_\_\_\_\_ \$ \_\_\_\_\_  
 Production Base and Pool Quota \$ \_\_\_\_\_  
 Other: \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 Total \$ \_\_\_\_\_

FOR DEPARTMENT USE

RATIO \_\_\_\_\_

BP \_\_\_\_\_

SP \_\_\_\_\_

17. Herd location of this business: \_\_\_\_\_
18. Mailing Address: \_\_\_\_\_
19. Telephone Number: (\_\_\_\_) \_\_\_\_\_
20. Name and address of cooperative association, if a member, or plant that received milk from this business: \_\_\_\_\_

21. Has any individual having an ownership interest in this dairy business purchased production base and pool quota during the previous 24-month period? ☐ Yes ☐ No If yes, complete the following:

Name of Buyer: \_\_\_\_\_ Certificate No. \_\_\_\_\_

22. If you are transferring 100% of your transferable entitlement, will you remain in business as a market milk producer?  
☐ Yes ☐ No

23. It is certified that the information contained in this application is true and correct and that the terms and conditions of this transfer have been fully disclosed. It is further certified that all individuals having an ownership interest in this dairy production business being transferred have signed this application.

**SIGNATURE(S) OF ALL INDIVIDUALS TRANSFERRING PRODUCTION BASE AND POOL QUOTA:**

(Must be signed by owner and spouse if proprietorship; by all partnership members and spouses if a partnership; by a corporation officer if a corporation.)

Transferor _____	Spouse _____	% _____
Transferor _____	Spouse _____	% _____
Transferor _____	Spouse _____	% _____
Transferor _____	Spouse _____	% _____

Corporation Officer \_\_\_\_\_

Title \_\_\_\_\_

(Attach copy of Minutes or Resolution authorizing transfer)